

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/577,382

FILING DATE

4-27-06

APPLICANT(S)

11-1-07 CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1		1	
2				1		1
3				1		1
4				1		1
5				1		1
6				1		1
7				1		1
8				1		1
9				1		1
10				1		1
11				1		1
12				1		1
13				1		1
14				1		1
15			1		1	
16				1		1
17				1		1
18				1		1
19				1		1
20				1		1
21				1		1
22				1		1
23			2		2	
24			2		2	
25					1	
26						
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28						
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46						
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48						
49						
50						
TOTAL IND.		↓	2	↓	4	↓
TOTAL DEP.		←	20	←	20	←
TOTAL CLAIMS			22		24	

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						